

PATENT APPLICATION DATA ENTRY FORM

INVENTOR INFORMATION

Inventor One Given Name:: **Michel**
Family Name:: **Gau**
Postal Address Line One:: **La grangette haute**
City:: **Ouveillan**
Country:: **France**
Postal or Zip Code:: **F-11590**
Citizenship Country:: **France**

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: **20028**
Name Line One:: **Barry R. Lipsitz**
Address Line One: **755 Main Street**
Address Line Two:: **Building 8**
City:: **Monroe**
State or Province:: **Connecticut**
Country:: **United States**
Postal or Zip Code:: **06468**
Telephone:: **(203) 459-0200**
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APPLICATION INFORMATION

Title Line One:: **INTERVERTEBRAL NUCLEUS PROSTHESIS AND**
Title Line Two:: **SURGICAL PROCEDURE FOR IMPLANTING**
Title Line Three:: **THE SAME**
Total Drawing Sheets:: **2**
Formal Drawings?: **YES**
Application Type:: **Utility**
Docket Number:: **HOE-676**
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:

REPRESENTATIVE INFORMATION

Representative Customer Number:: **20028**

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CONTINUITY INFORMATION

This application is a::continuation of
>Application One:: **PCT/EP00/07494**
Filing Date:: **August 2, 2000**

PRIOR FOREIGN APPLICATIONS

Foreign-Application One:: **99/10167**
Filing Date:: **August 3, 1999**
Country:: **France**
Priority Claimed:: **YES**

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